

First Regular Session 113th General Assembly (2003)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2002 Regular or Special Session of the General Assembly.

SENATE ENROLLED ACT No. 216

AN ACT to amend the Indiana Code concerning state police, civil defense and military affairs.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 5-2-10.5-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 6. The board is composed of the following members:

- (1) The executive director of the department of fire and building services **or the executive director's designee.**
- (2) The chairperson of the board of firefighting personnel standards and education.
- (3) The director of the state emergency management agency **or the director's designee.**
- (4) The commissioner of the department of environmental management **or the commissioner's designee.**
- (5) The state fire marshal **or the state fire marshal's designee.**
- (6) **The deputy director of the emergency medical services division of the state emergency management agency or the deputy director's designee.**
- (7) Five (5) individuals appointed by the governor, not more than three (3) of whom may represent the same political party, as follows:
 - (A) A professional firefighter.
 - (B) A volunteer firefighter.
 - (C) A public safety employee who is not a firefighter.

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(D) A municipal or county building inspector.

(E) A member of the medical profession.

SECTION 2. IC 9-19-14.5-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 1. A privately owned vehicle belonging to a **certified paramedic, certified emergency medical technician-intermediate, certified emergency medical technician-basic advanced**, certified emergency medical technician, certified emergency medical service driver, or certified emergency medical service first responder while traveling in the line of duty in connection with emergency medical services activities may display green lights, subject to the following restrictions and conditions:

- (1) The lights may not have a light source less than fifty (50) candlepower.
- (2) All lights shall be placed on the top of the vehicle.
- (3) Not more than two (2) green lights may be displayed on a vehicle and each light must be of the flashing or revolving type and visible at three hundred sixty (360) degrees.
- (4) The lights must consist of a lamp with a green lens and not of an uncolored lens with a green bulb. However, the revolving lights may contain multiple bulbs.
- (5) The green lights may not be a part of the regular head lamps displayed on the vehicle.
- (6) For a person authorized under this chapter to display a green light on the person's vehicle, the person must first secure a written permit from the director of the state emergency management agency to use the light. The permit must be carried by the person when the light is displayed.

SECTION 3. IC 9-30-6-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 6. (a) A physician or a person trained in obtaining bodily substance samples and acting under the direction of or under a protocol prepared by a physician, who:

- (1) obtains a blood, urine, or other bodily substance sample from a person, regardless of whether the sample is taken for diagnostic purposes or at the request of a law enforcement officer under this section; or
- (2) performs a chemical test on blood, urine, or other bodily substance obtained from a person;

shall deliver the sample or disclose the results of the test to a law enforcement officer who requests the sample or results as a part of a criminal investigation. Samples and test results shall be provided to a law enforcement officer even if the person has not consented to or otherwise authorized their release.

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(b) A physician, a hospital, or an agent of a physician or hospital is not civilly or criminally liable for any of the following:

- (1) Disclosing test results in accordance with this section.
- (2) Delivering a blood, urine, or other bodily substance sample in accordance with this section.
- (3) Obtaining a blood, urine, or other bodily substance sample in accordance with this section.
- (4) Disclosing to the prosecuting attorney or the deputy prosecuting attorney for use at or testifying at the criminal trial of the person as to facts observed or opinions formed.
- (5) Failing to treat a person from whom a blood, urine, or other bodily substance sample is obtained at the request of a law enforcement officer if the person declines treatment.
- (6) Injury to a person arising from the performance of duties in good faith under this section.

(c) For the purposes of this chapter, IC 9-30-5, or IC 9-30-9:

- (1) the privileges arising from a patient-physician relationship do not apply to the samples, test results, or testimony described in this section; and
- (2) samples, test results, and testimony may be admitted in a proceeding in accordance with the applicable rules of evidence.

(d) The exceptions to the patient-physician relationship specified in subsection (c) do not affect those relationships in a proceeding not covered by this chapter, IC 9-30-5, or IC 9-30-9.

(e) The test results and samples obtained by a law enforcement officer under subsection (a) may be disclosed only to a prosecuting attorney or a deputy prosecuting attorney for use as evidence in a criminal proceeding under this chapter, IC 9-30-5, or IC 9-30-9.

(f) This section does not require a physician or a person under the direction of a physician to perform a chemical test.

(g) A physician or a person trained in obtaining bodily substance samples and acting under the direction of or under a protocol prepared by a physician shall obtain a blood, urine, or other bodily substance sample if the following exist:

- (1) A law enforcement officer requests that the sample be obtained.
- (2) The law enforcement officer has certified in writing the following:
 - (A) That the officer has probable cause to believe the person from whom the sample is to be obtained has violated IC 9-30-5.
 - (B) That the person from whom the sample is to be obtained

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has been transported to a hospital or other medical facility.

(C) That the person from whom the sample is to be obtained has been involved in a motor vehicle accident that resulted in the serious bodily injury or death of another.

(D) That the accident that caused the serious bodily injury or death of another occurred not more than three (3) hours before the time the sample is requested.

(3) Not more than the use of reasonable force is necessary to obtain the sample.

(h) If the person:

(1) from whom the bodily substance sample is to be obtained under this section does not consent; and

(2) resists the taking of a sample;

the law enforcement officer may use reasonable force to assist an individual, who must be authorized under this section to obtain a sample, in the taking of the sample.

(i) The person authorized under this section to obtain a bodily substance sample shall take the sample in a medically accepted manner.

(j) A law enforcement officer may transport the person to a place other than a hospital where the sample may be obtained by any of the following persons who are trained in obtaining bodily substance samples and who have been engaged to obtain samples under this section:

(1) A physician holding an unlimited license to practice medicine or osteopathy.

(2) A registered nurse.

(3) A licensed practical nurse.

(4) **An advanced emergency medical technician technician-basic advanced (as defined in IC 16-18-2-6 IC 16-18-2-112.5).**

(5) **An emergency medical technician-intermediate (as defined in IC 16-18-2-112.7).**

(6) A paramedic (as defined in IC 16-18-2-266).

SECTION 4. IC 10-4-1-5, AS AMENDED BY P.L.123-2002, SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 5. (a) The department shall prepare and maintain a state emergency operations plan and keep it current, which plan may include:

(1) prevention and minimization of injury and damage caused by disaster;

(2) prompt and effective response to disaster;

(3) emergency relief;



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- (4) identification of areas particularly vulnerable to disaster;
 - (5) recommendations for:
 - (A) zoning;
 - (B) building;
 - (C) other land use controls;
 - (D) safety measures for securing mobile homes or other nonpermanent or semipermanent structures; and
 - (E) other preventive and preparedness measures designed to eliminate or reduce disaster or its impact;
- shall be disseminated to both the fire prevention and building safety commission and local authorities;
- (6) assistance to local officials in designing local emergency action plans;
 - (7) authorization and procedures for the erection or other construction of temporary works designed to protect against or mitigate danger, damage, or loss from flood, conflagration, or other disaster;
 - (8) preparation and distribution to the appropriate state and local officials of state catalogs of federal, state, and private assistance programs;
 - (9) organization of manpower and chains of command;
 - (10) coordination of federal, state, and local disaster activities;
 - (11) coordination of the state disaster plan with the disaster plans of the federal government; and
 - (12) other necessary matters.

(b) The department shall take an integral part in the development and revision of local and interjurisdictional disaster plans prepared under section 10 of this chapter. To this end it shall employ or otherwise secure the services of professional and technical personnel capable of providing expert assistance to political subdivisions, their disaster agencies, and interjurisdictional planning and disaster agencies. These personnel shall consult with subdivisions and agencies on a regularly scheduled basis, shall make field examinations of the areas, circumstances, and conditions to which particular local and interjurisdictional disaster plans are intended to apply, and may suggest revisions.

(c) In preparing and revising the state disaster plan, the department shall seek the advice and assistance of local government, business, labor, industry, agriculture, civic and volunteer organizations, and community leaders. In advising local and interjurisdictional agencies, the department shall encourage them to seek advice from these sources.

(d) The state disaster plan or any part of the plan may be

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incorporated in rules of the department or executive orders.

(e) The department shall:

- (1) determine requirements of the state and its political subdivisions for food, clothing, and other necessities in event of an emergency;
- (2) procure and pre-position supplies, medicines, materials, and equipment;
- (3) promulgate standards and requirements for local and interjurisdictional disaster plans;
- (4) provide for mobile support units;
- (5) assist political subdivisions, their disaster agencies, and interjurisdictional disaster agencies to establish and operate training programs and programs of public information;
- (6) make surveys of industries, resources, and facilities within the state, both public and private, as are necessary to carry out the purposes of this chapter;
- (7) plan and make arrangements for the availability and use of any private facilities, services, and property, and if necessary and if in fact they are used provide for payment for use under terms and conditions agreed upon;
- (8) establish a register of persons with types of training and skills important in emergency prevention, preparedness, response, and recovery;
- (9) establish a register of mobile and construction equipment and temporary housing available for use in a disaster emergency;
- (10) prepare, for issuance by the governor, executive orders, proclamations, and regulations as necessary or appropriate in coping with disaster;
- (11) cooperate with the federal government and any public or private agency or entity in achieving any purpose of this chapter and in implementing programs for disaster prevention, preparation, response, and recovery; and
- (12) do other things necessary, incidental, or appropriate for the implementation of this chapter.

(f) The department shall ascertain what means exist for rapid and efficient communications in times of disaster emergencies. The department shall consider the desirability of supplementing these communications resources or of integrating them into a comprehensive intrastate or state-federal telecommunications or other communications system or network. In studying the character and feasibility of any system or its several parts, the department shall evaluate the possibility of multipurpose use thereof for general state and local governmental

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purposes. The department shall make recommendations to the governor as appropriate.

(g) The department shall develop a statewide mutual aid program ~~and a to implement the~~ statewide mutual aid agreement.

SECTION 5. IC 10-14-3-9, AS ADDED BY SEA 257-2003, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 9. (a) The agency shall prepare and maintain a current state emergency operations plan. The plan may provide for the following:

- (1) Prevention and minimization of injury and damage caused by disaster.
- (2) Prompt and effective response to disaster.
- (3) Emergency relief.
- (4) Identification of areas particularly vulnerable to disaster.
- (5) Recommendations for:
 - (A) zoning;
 - (B) building;
 - (C) other land use controls;
 - (D) safety measures for securing mobile homes or other nonpermanent or semipermanent structures; and
 - (E) other preventive and preparedness measures designed to eliminate or reduce disaster or its impact;
 that must be disseminated to both the fire prevention and building safety commission and local authorities.
- (6) Assistance to local officials in designing local emergency action plans.
- (7) Authorization and procedures for the erection or other construction of temporary works designed to protect against or mitigate danger, damage, or loss from flood, conflagration, or other disaster.
- (8) Preparation and distribution to the appropriate state and local officials of state catalogs of federal, state, and private assistance programs.
- (9) Organization of manpower and chains of command.
- (10) Coordination of federal, state, and local disaster activities.
- (11) Coordination of the state disaster plan with the disaster plans of the federal government.
- (12) Other necessary matters.

(b) The agency shall take an integral part in the development and revision of local and interjurisdictional disaster plans prepared under section 17 of this chapter. The agency shall employ or otherwise secure the services of professional and technical personnel capable of

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providing expert assistance to political subdivisions, a political subdivision's disaster agencies, and interjurisdictional planning and disaster agencies. These personnel:

- (1) shall consult with subdivisions and government agencies on a regularly scheduled basis;
- (2) shall make field examinations of the areas, circumstances, and conditions to which particular local and interjurisdictional disaster plans are intended to apply; and
- (3) may suggest revisions.

(c) In preparing and revising the state disaster plan, the agency shall seek the advice and assistance of local government, business, labor, industry, agriculture, civic and volunteer organizations, and community leaders. In advising local and interjurisdictional agencies, the agency shall encourage local and interjurisdictional agencies to seek advice from the sources specified in this subsection.

(d) The state disaster plan or any part of the plan may be incorporated in rules of the agency or by executive orders.

(e) The agency shall do the following:

- (1) Determine requirements of the state and political subdivisions for food, clothing, and other necessities in the event of an emergency.
- (2) Procure and pre-position supplies, medicines, materials, and equipment.
- (3) Adopt standards and requirements for local and interjurisdictional disaster plans.
- (4) Provide for mobile support units.
- (5) Assist political subdivisions, political subdivisions' disaster agencies, and interjurisdictional disaster agencies to establish and operate training programs and public information programs.
- (6) Make surveys of industries, resources, and facilities in Indiana, both public and private, necessary to carry out this chapter.
- (7) Plan and make arrangements for the availability and use of any private facilities, services, and property, and if necessary and if the private facilities, services, or property is used, provide for payment for the use under agreed upon terms and conditions.
- (8) Establish a register of persons with types of training and skills important in emergency prevention, preparedness, response, and recovery.
- (9) Establish a register of mobile and construction equipment and temporary housing available for use in a disaster emergency.
- (10) Prepare, for issuance by the governor, executive orders,

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proclamations, and regulations necessary or appropriate in coping with disaster.

(11) Cooperate with the federal government and any public or private agency or entity in achieving any purpose of this chapter and in implementing programs for disaster prevention, preparation, response, and recovery.

(12) Do other things necessary, incidental, or appropriate to implement this chapter.

(f) The agency shall ascertain the rapid and efficient communications that exist in times of disaster emergencies. The agency shall consider the desirability of supplementing these communications resources or of integrating these resources into a comprehensive intrastate or state-federal telecommunications or other communications system or network. In studying the character and feasibility of any system, the agency shall evaluate the possibility of multipurpose use of the system for general state and local governmental purposes. The agency shall make appropriate recommendations to the governor.

(g) The agency shall develop a statewide mutual aid program ~~and a~~ **to implement the** statewide mutual aid agreement.

SECTION 6. IC 10-14-3-10.6 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 10.6. (a) As used in this section, "participating unit" refers to a unit that does not opt out under subsection (c) from participating in the statewide mutual aid program.**

(b) As used in this section, "unit" has the meaning set forth in IC 36-1-2-23.

(c) A unit may choose not to participate in the statewide mutual aid program if the unit:

(1) adopts an ordinance or a resolution declaring that the unit will not participate in the statewide mutual aid program; and

(2) provides a copy of the ordinance or resolution to:

(A) the local emergency management organization that serves the unit; and

(B) the department.

(d) Each participating unit shall establish an incident management system and a unified command system to be used in a response to a disaster or an emergency.

(e) A participating unit may request the assistance of at least one (1) other participating unit to:

(1) manage disaster response or recovery; or

(2) conduct disaster response or recovery related exercises,

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testing, or training.

(f) A request for assistance to a participating unit under subsection (e) shall be made by and to the executive of the unit or the executive's authorized representative. A request may be oral or in writing. A written request shall be made on forms developed by the department. An oral request shall be confirmed in writing not later than twenty-four (24) hours after the oral request is made.

(g) A request must include the following information:

(1) A description of the disaster response and recovery functions for which assistance is needed, including the following:

- (A) Fire.
- (B) Law enforcement.
- (C) Emergency medical.
- (D) Transportation.
- (E) Communications.
- (F) Public works and engineering.
- (G) Building inspection.
- (H) Planning and information assistance.
- (I) Mass care.
- (J) Resource support.
- (K) Health and other medical services.
- (L) Search and rescue.

(2) The amount and type of services, equipment, supplies, materials, personnel, and other resources needed and a reasonable estimate of the length of time they will be needed.

(3) The specific place and time for staging of the assisting participating unit's provision of assistance and a point of contact at that location.

(h) A participating unit that is requested to render assistance shall take the necessary action to provide and make available the requested services, equipment, supplies, materials, personnel, and other resources.

(i) A participating unit's obligation to provide assistance is subject to the following restrictions:

(1) A participating unit's request to receive assistance is effective only:

- (A) upon declaration of a local disaster emergency by the executive officer of the unit under section 23 of this chapter; or
- (B) upon the commencement of the exercises, testing, or training.

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- (2) The assistance shall continue as long as:
- (A) the state of emergency remains in effect and the loaned resources are required by the receiving participating unit or the loaned resources remain in the receiving participating unit; or
 - (B) the exercises, testing, or training is in progress.
- (3) The participating unit rendering the assistance may withhold resources or recall loaned resources to the extent necessary to provide for the participating unit's own reasonable protection.
- (4) Emergency forces providing assistance shall continue under the command and control of their regular leaders, but operationally those forces shall be under the control of the incident commander or unified commander designated by the requesting participating unit.

SECTION 7. IC 10-14-3-10.7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 10.7. (a) As used in this section, "participating unit" has the meaning set forth in section 10.6(a) of this chapter.

(b) Each participating unit shall provide for the payment of compensation and benefits to:

- (1) an injured member; and
- (2) a representative of a deceased member;

of the participating unit's emergency forces if the member is injured or killed while rendering assistance under section 10.6 of this chapter in the same manner and on the same terms as if the injury or death were sustained while the member was rendering assistance for or within the member's own unit. Expenses incurred under this subsection are not reimbursable under subsection (c).

(c) A participating unit rendering assistance for disaster response or recovery to another participating unit under section 10.6 of this chapter shall be reimbursed by the participating unit receiving the assistance for the following:

- (1) A loss of, damage to, or expense incurred in the operation of any equipment in answering the request for assistance.
- (2) An expense incurred in the provision of a service in answering the request for assistance.
- (3) An expense incurred in answering the request for assistance.

(d) Except as provided by an agreement entered into under subsection (e), the following labor and equipment reimbursement

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rates apply to reimbursement under subsection (c):

(1) The labor reimbursement rates are as follows:

(A) The straight time costs of the labor force of the participating unit rendering assistance shall be reimbursed at the normal pay rates for responding personnel.

(B) The overtime costs of the labor force of the participating unit rendering assistance shall be reimbursed at one hundred fifty percent (150%) of the normal pay rates for the responding personnel if it is the normal practice of the requesting unit to pay these personnel overtime.

(2) The equipment reimbursement rates are the lesser of the following:

(A) The rates for equipment costs reimbursement established by the Federal Emergency Management Agency or its successor agency.

(B) The equipment costs established by the participating unit rendering assistance.

(e) At least two (2) participating units may enter into agreements establishing a different allocation of loss, damage, expense, or costs among themselves than that specified in subsections (c) and (d).

(f) Officers and employees of a participating unit rendering assistance to another participating unit under this section shall be considered agents of the requesting unit for the purpose of tort liability and immunity.

(g) This section does not prevent any participating unit from entering into a mutual aid or other agreement with another unit or affect any other agreement to which a unit is a party, including an agreement entered into under this chapter or IC 36-1-7.

SECTION 8. IC 16-18-2-7, AS AMENDED BY SEA 257-2003, SECTION 43, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 7. (a) "Advanced life support", for purposes of IC 16-31, means care that is given:

(1) at the scene of:

(A) an accident;

(B) an act of terrorism (as defined in IC 35-41-1-26.5), if the governor has declared a disaster emergency under IC 10-14-3-12 in response to the act of terrorism; or

(C) an illness;

(2) during transport; or

(3) at a hospital;

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by a paramedic or an ~~advanced~~ emergency medical technician **technician-intermediate** and that is more advanced than the care usually provided by an emergency medical technician **or an emergency medical technician-basic advanced**.

(b) The term may include any of the following:

- (1) Defibrillation.
- (2) Endotracheal intubation.
- (3) Parenteral injections of appropriate medications. ~~including administration of epinephrine through an auto-injector.~~
- (4) Electrocardiogram interpretation.
- (5) Emergency management of trauma and illness.

SECTION 9. IC 16-18-2-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 10. **(a) "Agency", for purposes of IC 16-31-8.5, has the meaning set forth in IC 16-31-8.5-1.**

(b) "Agency", for purposes of IC 16-41-37, has the meaning set forth in IC 16-41-37-1.

SECTION 10. IC 16-18-2-33.5, AS AMENDED BY P.L.93-2002, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 33.5. (a) "Basic life support", for purposes of IC 16-31, means the following:

- (1) Assessment of emergency patients.
- (2) Administration of oxygen.
- (3) Use of mechanical breathing devices.
- (4) Application of anti-shock trousers.
- (5) Performance of cardiopulmonary resuscitation.
- (6) Application of dressings and bandage materials.
- (7) Application of splinting and immobilization devices.
- (8) Use of lifting and moving devices to ensure safe transport.
- (9) Use of an automatic or a semiautomatic defibrillator if the defibrillator is used in accordance with training procedures established by the Indiana emergency medical services commission.
- (10) Administration by an emergency medical technician **or emergency medical technician-basic advanced** of epinephrine through an auto-injector.
- (11) **For an emergency medical technician-basic advanced, the following:**
 - (A) Electrocardiogram interpretation.**
 - (B) Manual external defibrillation.**
 - (C) Intravenous fluid therapy.**
- (12) Other procedures authorized by the Indiana emergency



medical services commission, including procedures contained in the revised national emergency medical technician basic training curriculum guide.

(b) Except as provided by:

(1) subsection (a)(10) and the training and certification standards established under IC 16-31-2-9(4);

(2) subsection (a)(11)(C); and

(3) the training standards established under IC 16-31-2-9(5); in subsection (a)(10) and by the training and certification standards established under IC 16-31-2-9(5); the term does not include invasive medical care techniques or advanced life support. except as provided by the training and certification standards established under IC 16-31-2-9(4).

SECTION 11. IC 16-18-2-109.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS: **Sec. 109.1. "Emergency medical dispatch agency", for purposes of IC 16-31-3.5, has the meaning set forth in IC 16-35-3.5-1.**

SECTION 12. IC 16-18-2-109.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS: **Sec. 109.3. "Emergency medical dispatcher", for purposes of IC 16-31-3.5, has the meaning set forth in IC 16-35-3.5-1.**

SECTION 13. IC 16-18-2-109.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS: **Sec. 109.5. "Emergency medical dispatching", for purposes of IC 16-31-3.5, has the meaning set forth in IC 16-35-3.5-1.**

SECTION 14. IC 16-18-2-112.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 112.5. "Emergency medical technician-basic advanced", for purposes of IC 16-31, means an individual who is certified under IC 16-31 to provide basic life support at the scene of an accident or illness or during transport.**

SECTION 15. IC 16-18-2-112.7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 112.7. "Emergency medical technician-intermediate", for purposes of IC 16-31, means an individual who can perform at least one (1) of but not all the procedures of a paramedic and who:**

(1) has completed a prescribed course in advanced life support;

(2) has been certified by the Indiana emergency medical services commission;

(3) is associated with a single supervising hospital; and



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(4) is affiliated with a provider organization.

SECTION 16. IC 16-18-2-143, AS AMENDED BY P.L.81-2002, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 143. (a) "Fund", for purposes of IC 16-26-2, has the meaning set forth in IC 16-26-2-2.

(b) "Fund", for purposes of IC 16-31-8.5, has the meaning set forth in IC 16-31-8.5-2.

(c) "Fund", for purposes of IC 16-46-5, has the meaning set forth in IC 16-46-5-3.

(d) "Fund", for purposes of IC 16-46-12, has the meaning set forth in IC 16-46-12-1.

SECTION 17. IC 16-18-2-163, AS AMENDED BY P.L.148-1999, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 163. (a) "Health care provider", for purposes of IC 16-21 and IC 16-41, means any of the following:

- (1) An individual, a partnership, a corporation, a professional corporation, a facility, or an institution licensed or legally authorized by this state to provide health care or professional services as a licensed physician, a psychiatric hospital, a hospital, a health facility, an emergency ambulance service (IC 16-31-3), a dentist, a registered or licensed practical nurse, a midwife, an optometrist, a pharmacist, a podiatrist, a chiropractor, a physical therapist, a respiratory care practitioner, an occupational therapist, a psychologist, a paramedic, an emergency medical technician, ~~or an advanced emergency technician~~, **medical technician-basic advanced, an emergency medical technician-intermediate**, or a person who is an officer, employee, or agent of the individual, partnership, corporation, professional corporation, facility, or institution acting in the course and scope of the person's employment.
- (2) A college, university, or junior college that provides health care to a student, a faculty member, or an employee, and the governing board or a person who is an officer, employee, or agent of the college, university, or junior college acting in the course and scope of the person's employment.
- (3) A blood bank, community mental health center, community mental retardation center, community health center, or migrant health center.
- (4) A home health agency (as defined in IC 16-27-1-2).
- (5) A health maintenance organization (as defined in IC 27-13-1-19).
- (6) A health care organization whose members, shareholders, or

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partners are health care providers under subdivision (1).

(7) A corporation, partnership, or professional corporation not otherwise qualified under this subsection that:

- (A) provides health care as one (1) of the corporation's, partnership's, or professional corporation's functions;
- (B) is organized or registered under state law; and
- (C) is determined to be eligible for coverage as a health care provider under IC 34-18 for the corporation's, partnership's, or professional corporation's health care function.

Coverage for a health care provider qualified under this subdivision is limited to the health care provider's health care functions and does not extend to other causes of action.

(b) "Health care provider", for purposes of IC 16-35, has the meaning set forth in subsection (a). However, for purposes of IC 16-35, the term also includes a health facility (as defined in section 167 of this chapter).

(c) "Health care provider", for purposes of IC 16-36-5, means an individual licensed or authorized by this state to provide health care or professional services as:

- (1) a licensed physician;
- (2) a registered nurse;
- (3) a licensed practical nurse;
- (4) an advanced practice nurse;
- (5) a licensed nurse midwife;
- (6) a paramedic;
- (7) an emergency medical technician;
- (8) an ~~advanced~~ emergency medical technician or technician-basic advanced;
- (9) an emergency medical technician-intermediate; or
- (10) a first responder, as defined under IC 16-18-2-131.

The term includes an individual who is an employee or agent of a health care provider acting in the course and scope of the individual's employment.

SECTION 18. IC 16-18-2-223.6 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS: **Sec. 223.6. "Medical director", for purposes of IC 16-31-3.5, has the meaning set forth in IC 16-35-3.5-1.**

SECTION 19. IC 16-18-2-295, AS AMENDED BY P.L.256-1999, SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 295. (a) "Provider", for purposes of IC 16-38-5, IC 16-39 (except for IC 16-39-7) and IC 16-41-1 through IC 16-41-9 and IC 16-41-37, means any of the following:



(1) An individual (other than an individual who is an employee or a contractor of a hospital, a facility, or an agency described in subdivision (2) or (3)) who is licensed, registered, or certified as a health care professional, including the following:

- (A) A physician.
- (B) A psychotherapist.
- (C) A dentist.
- (D) A registered nurse.
- (E) A licensed practical nurse.
- (F) An optometrist.
- (G) A podiatrist.
- (H) A chiropractor.
- (I) A physical therapist.
- (J) A psychologist.
- (K) An audiologist.
- (L) A speech-language pathologist.
- (M) A dietitian.
- (N) An occupational therapist.
- (O) A respiratory therapist.
- (P) A pharmacist.

(2) A hospital or facility licensed under IC 16-21-2 or IC 12-25 or described in IC 12-24-1 or IC 12-29.

(3) A health facility licensed under IC 16-28-2.

(4) A home health agency licensed under IC 16-27-1.

(5) An employer of a certified emergency medical technician, a certified ~~advanced~~ emergency medical ~~technician~~ **technician-basic advanced, a certified emergency medical technician-intermediate**, or a certified paramedic.

(6) The state department or a local health department or an employee, agent, designee, or contractor of the state department or local health department.

(b) "Provider", for purposes of IC 16-39-7-1, has the meaning set forth in IC 16-39-7-1(a).

SECTION 20. IC 16-18-2-337 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 337. "Sponsoring" or "supervising hospital", for purposes of IC 16-31, means a hospital:

- (1) that is licensed under IC 16-21-2 or under the licensing law of another state; and
- (2) that has been certified by the emergency medical services commission to sponsor or supervise paramedics, ~~advanced~~ emergency medical ~~technicians~~, **technicians-intermediate**, and provider organizations in providing advanced life support.



SECTION 21. IC 16-31-2-9, AS AMENDED BY P.L.93-2002, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 9. The commission shall establish the following:

- (1) Standards for persons who provide emergency medical services and who are not licensed or regulated under IC 16-31-3.
- (2) Training and certification standards for the use of automatic and semiautomatic defibrillators by first responders.
- (3) Training ~~and certification~~ standards for the administration of antidotes, vaccines, and antibiotics to prepare for or respond to a terrorist or military attack.
- (4) Training and certification standards for the administration of epinephrine through an auto-injector by:

- (A) an emergency medical technician; or
- (B) an ~~advanced~~ emergency medical ~~technician~~ **technician-basic advanced.**

- (5) Training ~~and certification~~ standards to permit the use of antidote kits **containing atropine and pralidoxime chloride** for the treatment of exposure to ~~chemical agent VX (nerve agent)~~ **nerve agents** by ~~advanced an emergency medical technicians~~ **technician-basic advanced, and emergency medical technicians who an emergency medical technician, or a first responder.** work for emergency medical service providers located in:

- (A) a county having a population of more than eight thousand (8,000) but less than nine thousand (9,000);
- (B) a county having a population of more than sixteen thousand seven hundred (16,700) but less than seventeen thousand (17,000);
- (C) a county having a population of more than seventeen thousand (17,000) but less than seventeen thousand five hundred (17,500);
- (D) a county having a population of more than seventeen thousand five hundred (17,500) but less than eighteen thousand (18,000);
- (E) a county having a population of more than thirty-six thousand (36,000) but less than thirty-six thousand seventy-five (36,075);
- (F) a county having a population of more than thirty-seven thousand (37,000) but less than thirty-eight thousand (38,000); and
- (G) a county having a population of more than one hundred five thousand (105,000) but less than one hundred ten thousand (110,000).



SECTION 22. IC 16-31-2-11, AS AMENDED BY P.L.127-2001, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 11. (a) The commission shall develop procedures for ongoing review of all emergency ambulance services.

(b) The commission may review any pre-hospital ambulance rescue or report record regarding an emergency patient that is utilized or compiled by an emergency ambulance service employing paramedics, **emergency medical technicians-intermediate**, emergency medical technicians, or ~~advanced emergency medical technicians-technicians-basic~~ **advanced**. However, except as provided in subsection (d), those records shall remain confidential and may be used solely for the purpose of compiling data and statistics. The use of such data or statistics is subject to IC 4-1-6.

(c) The commission may develop and oversee experimental study projects conducted by ambulance service providers in limited geographic areas of Indiana. These study projects must be developed and conducted in accordance with rules adopted by the commission under IC 4-22-2. These study projects must be designed to test the efficacy of new patient care techniques and new ambulance service systems.

(d) This subsection applies to emergency ambulance services that are provided by or under a contract with an entity that is a public agency for purposes of IC 5-14-3. The following information, if contained in a pre-hospital ambulance rescue or report record regarding an emergency patient, is public information and must be made available for inspection and copying under IC 5-14-3:

- (1) The date and time of the request for ambulance services.
- (2) The reason for the request for assistance.
- (3) The time and nature of the response to the request for ambulance services.
- (4) The time of arrival at the scene where the patient was located.
- (5) The time of departure from the scene where the patient was located.
- (6) The name of the facility, if any, to which the patient was delivered for further treatment and the time of arrival at that facility.

SECTION 23. IC 16-31-3-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 5. (a) The commission shall waive any rule for a person who provides emergency ambulance service, an emergency medical technician, **an emergency medical technician-basic** **advanced**, **an emergency medical technician-intermediate**, a **paramedic**, or an ambulance when

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operating from a location in an adjoining state by contract with an Indiana unit of government to provide emergency ambulance or medical services to patients who are picked up or treated in Indiana.

(b) The commission may waive any rule, including a rule establishing a fee, for a person who submits facts demonstrating that:

(1) compliance with the rule will impose an undue hardship on the person; and

(2) either:

(A) noncompliance with the rule; or

(B) compliance with an alternative requirement approved by the commission;

will not jeopardize the quality of patient care. However, the commission may not waive a rule that sets forth educational requirements for a person regulated under this article.

(c) A waiver granted under subsection (b)(2)(B) is conditioned upon compliance with the alternative requirement approved under subsection (b).

(d) The commission shall establish an expiration date for any waiver that is granted.

(e) The commission may renew a waiver if the person makes the same demonstration required for the original waiver.

SECTION 24. IC 16-31-3-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 10. (a) Except as provided in subsection (b), to renew a certificate issued under this chapter upon expiration of the certificate for any reason, a person must comply with any continuing education requirements that have been established by the commission. To renew a certificate issued under this chapter after a ~~suspension, revocation or termination~~ of the certificate, a person must comply with all the requirements of this chapter that apply to the original certification.

(b) A renewal of an emergency medical technician, an emergency medical technician-basic advanced, an emergency medical technician-intermediate, or a paramedic certificate shall be issued to an individual who meets the following conditions:

(1) While holding a valid ~~emergency medical technician~~ certificate, enters the armed forces of the United States, including:

(A) the army;

(B) the navy;

(C) the air force;

(D) the marines; or

(E) the coast guard;



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but excluding the guard and reserve components of those forces.

(2) Is discharged from the armed forces of the United States **within** forty-eight (48) months after the individual entered the armed forces.

(3) Successfully completes, not more than nine (9) months after the individual's discharge from the armed forces of the United States, a refresher course approved by the commission.

(4) Applies for the certificate renewal not more than one (1) year after the individual's discharge from the armed forces of the United States.

(5) Passes the written and practical skills examinations.

(c) A renewal of an emergency medical technician, an emergency medical technician-basic advanced, an emergency medical technician-intermediate, or a paramedic certificate must be issued to an individual who meets the following conditions:

(1) While holding a valid certificate, the individual is called to active military duty as a member of the Indiana national guard or a reserve component of the armed forces of the United States, including:

- (A) the army;**
- (B) the navy;**
- (C) the air force;**
- (D) the marines; or**
- (E) the coast guard.**

(2) The individual provides the emergency medical services commission with a copy of the document from the armed forces that called the individual to active duty.

(3) The individual applies for the certificate renewal not more than one hundred twenty (120) days after the individual leaves active duty.

SECTION 25. IC 16-31-3-14 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 14. (a) Except as provided in subsection (d), after notice and hearing the commission may suspend or revoke a certificate issued under this chapter for failure to comply and maintain compliance with or for violation of any applicable provisions, standards, or other requirements of this chapter or rules adopted under this chapter. **(a) A person holding a certificate issued under this article must comply with the applicable standards and rules established under this article. A certificate holder is subject to disciplinary sanctions under subsection (b) if the state emergency management agency determines that the certificate holder:**

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- (1) engaged in or knowingly cooperated in fraud or material deception in order to obtain a certificate, including cheating on a certification examination;
- (2) engaged in fraud or material deception in the course of professional services or activities;
- (3) advertised services or goods in a false or misleading manner;
- (4) falsified or knowingly allowed another person to falsify attendance records or certificates of completion of continuing education courses required under this article or rules adopted under this article;
- (5) is convicted of a crime, if the act that resulted in the conviction has a direct bearing on determining if the certificate holder should be entrusted to provide emergency medical services;
- (6) is convicted of violating IC 9-19-14.5;
- (7) fails to comply and maintain compliance with or violates any applicable provision, standard, or other requirement of this article or rules adopted under this article;
- (8) continues to practice if the certificate holder becomes unfit to practice due to:
 - (A) professional incompetence that includes the undertaking of professional activities that the certificate holder is not qualified by training or experience to undertake;
 - (B) failure to keep abreast of current professional theory or practice;
 - (C) physical or mental disability; or
 - (D) addiction to, abuse of, or dependency on alcohol or other drugs that endanger the public by impairing the certificate holder's ability to practice safely;
- (9) engages in a course of lewd or immoral conduct in connection with the delivery of services to the public;
- (10) allows the certificate holder's name or a certificate issued under this article to be used in connection with a person who renders services beyond the scope of that person's training, experience, or competence;
- (11) is subjected to disciplinary action in another state or jurisdiction on grounds similar to those contained in this chapter. For purposes of this subdivision, a certified copy of a record of disciplinary action constitutes prima facie evidence of a disciplinary action in another jurisdiction;

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(12) assists another person in committing an act that would constitute a ground for disciplinary sanction under this chapter; or

(13) allows a certificate issued by the commission to be:

(A) used by another person; or

(B) displayed to the public when the certificate is expired, inactive, invalid, revoked, or suspended.

(b) On motion of the commission or on the verified written complaint of an interested person, the director of the state emergency management agency shall conduct an investigation.

(b) The state emergency management agency may issue an order under IC 4-21.5-3-6 to impose one (1) or more of the following sanctions if the state emergency management agency determines that a certificate holder is subject to disciplinary sanctions under subsection (a):

(1) Revocation of a certificate holder's certificate for a period not to exceed seven (7) years.

(2) Suspension of a certificate holder's certificate for a period not to exceed seven (7) years.

(3) Censure of a certificate holder.

(4) Issuance of a letter of reprimand.

(5) Assessment of a civil penalty against the certificate holder in accordance with the following:

(A) The civil penalty may not exceed five hundred dollars (\$500) per day per violation.

(B) If the certificate holder fails to pay the civil penalty within the time specified by the state emergency management agency, the state emergency management agency may suspend the certificate holder's certificate without additional proceedings.

(6) Placement of a certificate holder on probation status and requirement of the certificate holder to:

(A) report regularly to the state emergency management agency upon the matters that are the basis of probation;

(B) limit practice to those areas prescribed by the state emergency management agency;

(C) continue or renew professional education approved by the state emergency management agency until a satisfactory degree of skill has been attained in those areas that are the basis of the probation; or

(D) perform or refrain from performing any acts, including community restitution or service without

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compensation, that the state emergency management agency considers appropriate to the public interest or to the rehabilitation or treatment of the certificate holder.

The state emergency management agency may withdraw or modify this probation if the state emergency management agency finds after a hearing that the deficiency that required disciplinary action is remedied or that changed circumstances warrant a modification of the order.

(c) Except as provided in subsection (d), the commission may initiate proceedings to suspend or revoke a certificate on the commission's own motion or on the verified written complaint of an interested person. All proceedings to suspend or revoke a certificate shall be conducted in accordance with IC 4-21.5-3.

(c) If an applicant or a certificate holder has engaged in or knowingly cooperated in fraud or material deception to obtain a certificate, including cheating on the certification examination, the state emergency management agency may rescind the certificate if it has been granted, void the examination or other fraudulent or deceptive material, and prohibit the applicant from reapplying for the certificate for a length of time established by the state emergency management agency.

(d) The commission or the director may, on finding that the public health or safety is in imminent danger, temporarily suspend a certificate without hearing for not more than ninety (90) days on notice to the certificate holder.

(d) The state emergency management agency may deny certification to an applicant who would be subject to disciplinary sanctions under subsection (b) if that person were a certificate holder, has had disciplinary action taken against the applicant or the applicant's certificate to practice in another state or jurisdiction, or has practiced without a certificate in violation of the law. A certified copy of the record of disciplinary action is conclusive evidence of the other jurisdiction's disciplinary action.

(e) On suspension, revocation, or termination of a certificate, the provision of the service shall cease.

(e) The state emergency management agency may order a certificate holder to submit to a reasonable physical or mental examination if the certificate holder's physical or mental capacity to practice safely and competently is at issue in a disciplinary proceeding. Failure to comply with a state emergency management agency order to submit to a physical or mental examination makes a certificate holder liable to temporary suspension under

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subsection (i).

(f) A written complaint filed with the commission and information pertaining to the complaint are confidential until one (1) of following occurs:

- (1) Notice is sent under IC 4-21.5-3 that certification suspension or revocation proceedings relating to the complaint or information have been initiated.
- (2) Notice is sent under section 17 of this chapter that a hearing is to be held concerning the imposition of a fine for a violation relating to the complaint or information.
- (3) The complaint or information is required to be disclosed by the order of a court.

(f) Except as provided under subsection (a) and section 14.5 of this chapter, a certificate may not be denied, revoked, or suspended because the applicant or certificate holder has been convicted of an offense. The acts from which the applicant's or certificate holder's conviction resulted may be considered as to whether the applicant or certificate holder should be entrusted to serve the public in a specific capacity.

(g) The commission may suspend or revoke a certificate under this section for not more than seven (7) years from the date the suspension or revocation is effective. After the time set by the commission has expired, the certificate holder may apply for renewal of the certificate under this chapter.

(g) The state emergency management agency may deny, suspend, or revoke a certificate issued under this chapter if the individual who holds or is applying for the certificate is convicted of any of the following:

- (1) Possession of cocaine, a narcotic drug, or methamphetamine under IC 35-48-4-6.
- (2) Possession of a controlled substance under IC 35-48-4-7(a).
- (3) Fraudulently obtaining a controlled substance under IC 35-48-4-7(b).
- (4) Manufacture of paraphernalia as a Class D felony under IC 35-48-4-8.1(b).
- (5) Dealing in paraphernalia as a Class D felony under IC 35-48-4-8.5(b).
- (6) Possession of paraphernalia as a Class D felony under IC 35-48-4-8.3(b).
- (7) Possession of marijuana, hash oil, or hashish as a Class D felony under IC 35-48-4-11.
- (8) Maintaining a common nuisance under IC 35-48-4-13.



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(9) An offense relating to registration, labeling, and prescription forms under IC 35-48-4-14.

(10) Conspiracy under IC 35-41-5-2 to commit an offense listed in subdivisions (1) through (9).

(11) Attempt under IC 35-41-5-1 to commit an offense listed in subdivisions (1) through (10).

(12) An offense in any other jurisdiction in which the elements of the offense for which the conviction was entered are substantially similar to the elements of an offense described by subdivisions (1) through (11).

(h) A decision of the state emergency management agency under subsections (b) through (g) may be appealed to the commission under IC 4-21.5-3-7.

(i) The state emergency management agency may temporarily suspend a certificate holder's certificate under IC 4-21.5-4 before a final adjudication or during the appeals process if the state emergency management agency finds that a certificate holder would represent a clear and immediate danger to the public's health, safety, or property if the certificate holder were allowed to continue to practice.

(j) On receipt of a complaint or information alleging that a person certified under this chapter or IC 16-31-3.5 has engaged in or is engaging in a practice that is subject to disciplinary sanctions under this chapter, the state emergency management agency must initiate an investigation against the person.

(k) The state emergency management agency shall conduct a factfinding investigation as the state emergency management agency considers proper in relation to the complaint.

(l) The state emergency management agency may reinstate a certificate that has been suspended under this section if the state emergency management agency is satisfied that the applicant is able to practice with reasonable skill, competency, and safety to the public. As a condition of reinstatement, the state emergency management agency may impose disciplinary or corrective measures authorized under this chapter.

(m) The state emergency management agency may not reinstate a certificate that has been revoked under this chapter.

(n) The state emergency management agency must be consistent in the application of sanctions authorized in this chapter. Significant departures from prior decisions involving similar conduct must be explained in the state emergency management agency's findings or orders.

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(o) A certificate holder may not surrender the certificate holder's certificate without the written approval of the state emergency management agency, and the state emergency management agency may impose any conditions appropriate to the surrender or reinstatement of a surrendered certificate.

(p) For purposes of this section, "certificate holder" means a person who holds:

- (1) an unlimited certificate;
- (2) a limited or probationary certificate; or
- (3) an inactive certificate.

SECTION 26. IC 16-31-3-14.5, AS AMENDED BY P.L.1-2002, SECTION 74, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 14.5. The ~~commission~~ **state emergency management agency** may **issue an order under IC 4-21.5-3-6 to deny an applicant's request for certification or** permanently revoke a ~~license or~~ certificate under procedures provided by section 14 of this chapter if the individual who holds the ~~license or~~ certificate issued under this title is convicted of any of the following:

- (1) Dealing in or manufacturing cocaine, a narcotic drug, or methamphetamine under IC 35-48-4-1.
- (2) Dealing in a schedule I, II, or III controlled substance under IC 35-48-4-2.
- (3) Dealing in a schedule IV controlled substance under IC 35-48-4-3.
- (4) Dealing in a schedule V controlled substance under IC 35-48-4-4.
- (5) Dealing in a substance represented to be a controlled substance under IC 35-48-4-4.5.
- (6) Knowingly or intentionally manufacturing, advertising, distributing, or possessing with intent to manufacture, advertise, or distribute a substance represented to be a controlled substance under IC 35-48-4-4.6.
- (7) Dealing in a counterfeit substance under IC 35-48-4-5.
- (8) Dealing in marijuana, hash oil, or hashish under IC 35-48-4-10(b).
- (9) Conspiracy under IC 35-41-5-2 to commit an offense listed in subdivisions (1) through (8).
- (10) Attempt under IC 35-41-5-1 to commit an offense listed in subdivisions (1) through (8).
- (11) A crime of violence (as defined in IC 35-50-1-2(a)).
- (12) An offense in any other jurisdiction in which the elements of the offense for which the conviction was entered are substantially

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similar to the elements of an offense described under subdivisions (1) through (11).

SECTION 27. IC 16-31-3-17 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 17. (a) ~~The director~~ **state emergency management agency may issue an order to may** ~~penalize an ambulance service provider or a person certified under this chapter who has practiced without a certificate in violation of this article imposing a civil penalty of not more than five hundred dollars (\$500) per occurrence. for a violation of a patient care standard or rule that is established by the commission under rules adopted under IC 4-22-2.~~

(b) ~~A civil penalty may be imposed only after a hearing on the imposition of the penalty has been held by the director or the director's designee. Notice of the hearing must be mailed to the provider at least ten (10) days before the date set for the hearing.~~

(c) ~~An ambulance service provider or a person certified under this chapter who is penalized under this chapter may appeal the determination under IC 4-21.5. At the hearing, the provider or certified person is entitled to do the following:~~

- (1) ~~Be represented by an attorney.~~
- (2) ~~Present evidence in that person's behalf.~~
- (3) ~~Cross-examine witnesses.~~

(b) A decision of the state emergency management agency under subsection (a) may be appealed to the commission under IC 4-21.5-3-7.

SECTION 28. IC 16-31-3-19 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 19. The commission shall appoint an advanced life support operations subcommittee to advise the commission on the development of:

- (1) standards for the certification of:
 - (A) provider organizations;
 - (B) paramedics;
 - (C) ~~advanced~~ emergency medical ~~technicians;~~ **technicians-intermediate;** and
 - (D) supervising hospitals; and
- (2) rules governing the operation of advanced life support services.

SECTION 29. IC 16-31-3-20 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 20. The commission shall adopt rules under IC 4-22-2 that promote the orderly development of advanced life support services in Indiana. The rules must include the following:



(1) Requirements and procedures for the certification of provider organizations, paramedics, ~~advanced~~ emergency medical ~~technicians~~, **technicians-intermediate**, and supervising hospitals.

(2) Rules governing the operation of advanced life support services, including the medications and procedures that may be administered and performed by paramedics and ~~advanced~~ emergency medical ~~technicians~~, **technicians-intermediate**.

SECTION 30. IC 16-31-3-21 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 21. (a) Notwithstanding any other law, a certified paramedic or ~~an advanced~~ **a certified** emergency medical ~~technician~~ **technician-intermediate** may perform advanced life support in an emergency according to the rules of the commission.

(b) Notwithstanding any other law, a person may, during a course of instruction in advanced life support, perform advanced life support according to the rules of the commission.

SECTION 31. IC 16-31-3-23, AS ADDED BY P.L.17-2002, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 23. An emergency medical technician or ~~advanced~~ emergency medical ~~technician~~ **technician-basic advanced** who is certified under this article may administer epinephrine through an auto-injector to an individual who is experiencing symptoms of an allergic reaction or anaphylaxis.

SECTION 32. IC 16-31-3.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]:

Chapter 3.5. Emergency Medical Dispatch

Sec. 1. (a) The definitions in this section apply throughout this chapter.

(b) "Medical director" means a licensed physician who provides emergency medical dispatch medical direction to the emergency medical dispatch agency and works with the local emergency medical services medical director, if not the same person.

(c) "Emergency medical dispatcher" means a person who is trained to provide emergency medical dispatch services and who is certified under this chapter.

(d) "Emergency medical dispatching" means the reception, evaluation, processing, and provision of dispatch life support, management of requests for emergency medical assistance, and participation in ongoing evaluation and improvement of the emergency medical dispatch process. This process includes identifying the nature of the request, prioritizing the severity of the

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request, dispatching the necessary resources, providing medical aid and safety instructions to the callers, and coordinating the responding resources as needed, but does not include call routing itself.

(e) "Emergency medical dispatch agency" means any person that provides emergency medical dispatching for emergency medical assistance that is certified under this chapter.

Sec. 2. This chapter does not apply to a person who solely dispatches prescheduled emergency medical transports.

Sec. 3. (a) An individual may not furnish, operate, conduct, maintain, or advertise services as an emergency medical dispatcher or otherwise be engaged as an emergency medical dispatcher unless that individual is certified by the commission as an emergency medical dispatcher.

(b) A person may not furnish, operate, conduct, maintain, or advertise services as an emergency medical dispatcher or otherwise be engaged as an emergency medical dispatch agency unless certified by the commission as an emergency medical dispatch agency.

Sec. 4. (a) To be certified as an emergency medical dispatcher, an individual must:

- (1) meet the standards for education and training established by the commission;
- (2) successfully complete a written competency examination approved by the commission; and
- (3) pay the fee established by the commission.

(b) An emergency medical dispatcher certificate expires two (2) years after the date of its issuance. To renew a certificate, an emergency medical dispatcher must:

- (1) meet the education and training renewal standards established by the commission; and
- (2) pay the fee established by the commission.

(c) An emergency medical dispatcher must follow protocols, procedures, standards, and policies established by the commission.

(d) An emergency medical dispatcher shall keep the commission informed of the entity or agency that employs or supervises the dispatcher's activities as an emergency medical dispatcher.

(e) An emergency medical dispatcher shall report to the commission whenever an action has taken place that may justify the revocation or suspension of a certificate issued by the commission.

Sec. 5. (a) To be certified as an emergency medical dispatch

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agency, a person must:

- (1) meet the standards established by the commission; and
- (2) pay the fee established by the commission.

(b) An emergency medical dispatch agency certificate expires two (2) years after the date of its issuance. To renew a certificate, an emergency medical dispatch agency must:

- (1) meet the renewal requirements established by the commission; and
- (2) pay the fee established by the commission.

(c) The emergency medical dispatch agency must be operated in a safe, efficient, and effective manner in accordance with commission approved standards that include the following requirements:

(1) All personnel providing emergency medical dispatch services must be certified as emergency medical dispatchers by the commission before functioning alone in an online capacity.

(2) The protocols, procedures, standards, and policies used by an emergency medical dispatch agency to dispatch emergency medical aid must comply with the requirements established by the commission.

(3) The commission must require the emergency medical dispatch agency to appoint a dispatch medical director to provide supervision and oversight over the medical aspects of the operation of the emergency medical dispatch agency.

(d) The commission may require the submission of periodic reports from an emergency medical dispatch agency. The emergency medical dispatch agency must submit the reports in the manner and with the frequency required by the commission.

(e) An emergency medical dispatch agency shall report to the commission whenever an action occurs that may justify the revocation or suspension of a certificate issued by the commission.

Sec. 6. (a) The commission must require emergency medical dispatchers to participate in continuing emergency medical dispatch education and training.

(b) An emergency medical dispatcher education and training course must be approved by the commission and must be conducted by an instructor or instructors that meet qualifications established by the commission.

(c) A person may not offer or conduct a training course that is represented as a course for emergency medical dispatcher certification unless the course is approved by the commission and

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the instructor or instructors meet the qualifications established by the commission.

Sec. 7. The commission shall adopt rules under IC 4-22-2 to implement this chapter.

SECTION 33. IC 16-31-6-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 1. (a) ~~An ambulance attendant or~~ **A certified emergency medical technician or a certified emergency medical technician-basic advanced** who provides emergency ~~ambulance medical~~ services to an emergency patient is not liable for an act or omission in providing those services unless the act or omission constitutes negligence or willful misconduct. If the ~~attendant or~~ **emergency medical technician or emergency medical technician-basic advanced** is not liable for an act or omission, no other person incurs liability by reason of an agency relationship with the ~~attendant or~~ **emergency medical technician or emergency medical technician-basic advanced**.

(b) This section does not affect the liability of a driver of an ambulance for negligent operation of the ambulance.

SECTION 34. IC 16-31-6-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 3. An act or omission of a paramedic or ~~advanced an~~ **emergency medical technician technician-intermediate** done or omitted in good faith while providing advanced life support to a patient or trauma victim does not impose liability upon the paramedic or ~~advanced~~ **emergency medical technician technician-intermediate**, the authorizing physician, the hospital, or the officers, members of the staff, nurses, or other employees of the hospital or the local governmental unit if the advanced life support is provided:

- (1) in connection with an emergency;
- (2) in good faith; and
- (3) under the written or oral direction of a licensed physician;

unless the act or omission was a result of negligence or willful misconduct.

SECTION 35. IC 16-31-6-4, AS ADDED BY P.L.156-2001, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 4. (a) This section does not apply to an act or omission that was a result of gross negligence or willful or intentional misconduct.

(b) An act or omission of a paramedic, an ~~advanced~~ **emergency medical technician technician-intermediate**, an **emergency medical technician technician-basic advanced**, **an emergency medical technician**, or a person with equivalent certification from another state

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that is performed or made while providing advanced life support or basic life support to a patient or trauma victim does not impose liability upon the paramedic, the ~~advanced~~ emergency medical ~~technician~~ **technician-intermediate**, the emergency medical ~~technician~~ **technician-basic advanced, an emergency medical technician**, the person with equivalent certification from another state, a hospital, a provider organization, a governmental entity, or an employee or other staff of a hospital, provider organization, or governmental entity if the advanced life support or basic life support is provided in good faith:

- (1) in connection with a disaster emergency declared by the governor under IC 10-4-1-7 in response to an act that the governor in good faith believes to be an act of terrorism (as defined in IC 35-41-1-26.5); and
- (2) in accordance with the rules adopted by the Indiana emergency medical services commission or the disaster emergency declaration of the governor.

SECTION 36. IC 16-31-8.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]:

Chapter 8.5. Emergency Medical Services Fund

Sec. 1. As used in this chapter, "agency" refers to the state emergency management agency established by IC 10-8-2-1.

Sec. 2. As used in this chapter, "fund" refers to the emergency medical services fund established by section 3 of this chapter.

Sec. 3. The emergency medical services fund is established to defray the personal services expense, other operating expense, and capital outlay of the:

- (1) commission; and
- (2) employees of the agency.

Sec. 4. The agency shall administer the fund. Expenses of administering the fund shall be paid from money in the fund.

Sec. 5. The treasurer of state shall invest the money in the fund that is not currently needed to meet the obligations of the fund in the same manner as other public funds may be invested.

Sec. 6. Money in the fund at the end of a state fiscal year does not revert to the state general fund.

SECTION 37. IC 25-22.5-1-2, AS AMENDED BY P.L.255-2001, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 2. (a) This article, as it relates to the unlawful or unauthorized practice of medicine or osteopathic medicine, does not apply to any of the following:

- (1) A student in training in a medical school approved by the

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board, or while performing duties as an intern or a resident in a hospital under the supervision of the hospital's staff or in a program approved by the medical school.

(2) A person who renders service in case of emergency where no fee or other consideration is contemplated, charged, or received.

(3) A paramedic (as defined in IC 16-18-2-266), an ~~advanced~~ emergency medical ~~technician~~ **technician-basic advanced** (as defined in ~~IC 16-18-2-6~~ **IC 16-18-2-112.5**), an **emergency medical technician-intermediate** (as defined in **IC 16-18-2-112.7**), an emergency medical technician (as defined in IC 16-18-2-112), or a person with equivalent certification from another state who renders advanced life support (as defined in IC 16-18-2-7) or basic life support (as defined in IC 16-18-2-33.5):

(A) during a disaster emergency declared by the governor under IC 10-4-1-7 in response to an act that the governor in good faith believes to be an act of terrorism (as defined in IC 35-41-1-26.5); and

(B) in accordance with the rules adopted by the Indiana emergency medical services commission or the disaster emergency declaration of the governor.

(4) Commissioned medical officers or medical service officers of the armed forces of the United States, the United States Public Health Service, and medical officers of the United States Department of Veterans Affairs in the discharge of their official duties in Indiana.

(5) An individual who is not a licensee who resides in another state or country and is authorized to practice medicine or osteopathic medicine there, who is called in for consultation by an individual licensed to practice medicine or osteopathic medicine in Indiana.

(6) A person administering a domestic or family remedy to a member of the person's family.

(7) A member of a church practicing the religious tenets of the church if the member does not make a medical diagnosis, prescribe or administer drugs or medicines, perform surgical or physical operations, or assume the title of or profess to be a physician.

(8) A school corporation and a school employee who acts under IC 34-30-14 (or IC 34-4-16.5-3.5 before its repeal).

(9) A chiropractor practicing the chiropractor's profession under IC 25-10 or to an employee of a chiropractor acting under the

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direction and supervision of the chiropractor under IC 25-10-1-13.
 (10) A dental hygienist practicing the dental hygienist's profession under IC 25-13.

(11) A dentist practicing the dentist's profession under IC 25-14.

(12) A hearing aid dealer practicing the hearing aid dealer's profession under IC 25-20.

(13) A nurse practicing the nurse's profession under IC 25-23. However, a registered nurse may administer anesthesia if the registered nurse acts under the direction of and in the immediate presence of a physician and holds a certificate of completion of a course in anesthesia approved by the American Association of Nurse Anesthetists or a course approved by the board.

(14) An optometrist practicing the optometrist's profession under IC 25-24.

(15) A pharmacist practicing the pharmacist's profession under IC 25-26.

(16) A physical therapist practicing the physical therapist's profession under IC 25-27.

(17) A podiatrist practicing the podiatrist's profession under IC 25-29.

(18) A psychologist practicing the psychologist's profession under IC 25-33.

(19) A speech-language pathologist or audiologist practicing the pathologist's or audiologist's profession under IC 25-35.6.

(20) An employee of a physician or group of physicians who performs an act, a duty, or a function that is customarily within the specific area of practice of the employing physician or group of physicians, if the act, duty, or function is performed under the direction and supervision of the employing physician or a physician of the employing group within whose area of practice the act, duty, or function falls. An employee may not make a diagnosis or prescribe a treatment and must report the results of an examination of a patient conducted by the employee to the employing physician or the physician of the employing group under whose supervision the employee is working. An employee may not administer medication without the specific order of the employing physician or a physician of the employing group. Unless an employee is licensed or registered to independently practice in a profession described in subdivisions (9) through (18), nothing in this subsection grants the employee independent practitioner status or the authority to perform patient services in an independent practice in a profession.

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(21) A hospital licensed under IC 16-21 or IC 12-25.

(22) A health care organization whose members, shareholders, or partners are individuals, partnerships, corporations, facilities, or institutions licensed or legally authorized by this state to provide health care or professional services as:

- (A) a physician;
- (B) a psychiatric hospital;
- (C) a hospital;
- (D) a health maintenance organization or limited service health maintenance organization;
- (E) a health facility;
- (F) a dentist;
- (G) a registered or licensed practical nurse;
- (H) a midwife;
- (I) an optometrist;
- (J) a podiatrist;
- (K) a chiropractor;
- (L) a physical therapist; or
- (M) a psychologist.

(23) A physician assistant practicing the physician assistant's profession under IC 25-27.5.

(24) A physician providing medical treatment under IC 25-22.5-1-2.1.

(25) An attendant who provides care services as defined in IC 16-27-1-0.5.

(26) A personal services attendant providing authorized attendant care services under IC 12-10-17.

(b) A person described in subsection (a)(9) through (a)(18) is not excluded from the application of this article if:

- (1) the person performs an act that an Indiana statute does not authorize the person to perform; and
- (2) the act qualifies in whole or in part as the practice of medicine or osteopathic medicine.

(c) An employment or other contractual relationship between an entity described in subsection (a)(21) through (a)(22) and a licensed physician does not constitute the unlawful practice of medicine under this article if the entity does not direct or control independent medical acts, decisions, or judgment of the licensed physician. However, if the direction or control is done by the entity under IC 34-30-15 (or IC 34-4-12.6 before its repeal), the entity is excluded from the application of this article as it relates to the unlawful practice of medicine or osteopathic medicine.

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(d) This subsection does not apply to a prescription or drug order for a legend drug that is filled or refilled in a pharmacy owned or operated by a hospital licensed under IC 16-21. A physician licensed in Indiana who permits or authorizes a person to fill or refill a prescription or drug order for a legend drug except as authorized in IC 16-42-19-11 through IC 16-42-19-19 is subject to disciplinary action under IC 25-1-9. A person who violates this subsection commits the unlawful practice of medicine under this chapter.

(e) A person described in subsection (a)(8) shall not be authorized to dispense contraceptives or birth control devices.

SECTION 38. IC 34-6-2-37.2 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 37.2. "Emergency medical technician-basic advanced", for purposes of IC 34-18, has the meaning set forth in IC 34-18-2-12.1.**

SECTION 39. IC 34-6-2-37.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 37.4. "Emergency medical technician-intermediate", for purposes of IC 34-18, has the meaning set forth in IC 34-18-2-12.2.**

SECTION 40. IC 34-18-2-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 4. "Ambulance service" means a person who employs:

- (1) emergency medical technicians;
- (2) ~~advanced~~ emergency medical ~~technicians~~; **technicians-basic advanced**;
- (3) **emergency medical technicians-intermediate**; or
- ~~(3)~~ (4) paramedics.

SECTION 41. IC 34-18-2-12.1 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 12.1. (a) "Emergency medical technician-basic advanced" has the meaning set forth in IC 16-18-2-112.5.**

(b) The term does not include a person while the person is operating an emergency vehicle.

SECTION 42. IC 34-18-2-12.2 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 12.2. (a) "Emergency medical technician-intermediate" has the meaning set forth in IC 16-18-2-112.7.**

(b) The term does not include a person while the person is operating an emergency vehicle.



SECTION 43. IC 34-18-2-14 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 14. "Health care provider" means any of the following:

- (1) An individual, a partnership, a limited liability company, a corporation, a professional corporation, a facility, or an institution licensed or legally authorized by this state to provide health care or professional services as a physician, psychiatric hospital, hospital, health facility, emergency ambulance service (IC 16-18-2-107), dentist, registered or licensed practical nurse, physician assistant, midwife, optometrist, podiatrist, chiropractor, physical therapist, respiratory care practitioner, occupational therapist, psychologist, paramedic, emergency medical ~~technician~~, **technician-intermediate, emergency medical technician-basic advanced**, or ~~advanced~~ emergency medical technician, or a person who is an officer, employee, or agent of the individual, partnership, corporation, professional corporation, facility, or institution acting in the course and scope of the person's employment.
- (2) A college, university, or junior college that provides health care to a student, faculty member, or employee, and the governing board or a person who is an officer, employee, or agent of the college, university, or junior college acting in the course and scope of the person's employment.
- (3) A blood bank, community mental health center, community mental retardation center, community health center, or migrant health center.
- (4) A home health agency (as defined in IC 16-27-1-2).
- (5) A health maintenance organization (as defined in IC 27-13-1-19).
- (6) A health care organization whose members, shareholders, or partners are health care providers under subdivision (1).
- (7) A corporation, limited liability company, partnership, or professional corporation not otherwise qualified under this section that:

- (A) as one (1) of its functions, provides health care;
- (B) is organized or registered under state law; and
- (C) is determined to be eligible for coverage as a health care provider under this article for its health care function.

Coverage for a health care provider qualified under this subdivision is limited to its health care functions and does not extend to other causes of action.

SECTION 44. THE FOLLOWING ARE REPEALED [EFFECTIVE

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JULY 1, 2003]: IC 10-14-3-10; IC 16-18-2-6; IC 16-31-3-15; IC 16-31-6.5-1; IC 34-6-2-4; IC 34-18-2-3.

SECTION 45. [EFFECTIVE JULY 1, 2003] (a) **Notwithstanding IC 16-31-3.5-3(a), as added by this act, the prohibition against an individual acting as an emergency medical dispatcher unless the individual is certified by the Indiana emergency medical services commission as an emergency medical dispatcher does not apply to an individual before July 1, 2005.**

(b) **Notwithstanding IC 16-31-3.5-3(b), as added by this act, the prohibition against a person acting as an emergency medical dispatch agency unless the person is certified by the Indiana emergency medical services commission as an emergency medical dispatch agency does not apply to a person before July 1, 2005.**

(c) **This SECTION expires July 2, 2005.**

SECTION 46. IC 10-4-1-5.5 IS REPEALED [EFFECTIVE UPON PASSAGE].

SECTION 47. **An emergency is declared for this act.**

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President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Approved: _____

Governor of the State of Indiana

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